

POSITION	INITIALS	ID NO.	DATE
<b>BEST AVAILABLE COPY</b>			
FEES DETERMINATION	<i>h2</i>	8	07-12-01
O.I.P.E. CLASSIFIER			4901
FORMALITY REVIEW	<i>h2</i>	<i>58</i>	08-12-01
RESPONSE FORMALITY REVIEW	<i>jm</i>	929	11-12-01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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 08-27-01  
 850  
 11-12-01